

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> Addressee <i>X Amy R. Loford</i></p>	
<p>1. Article Addressed to:</p> <p>Certegy Check Services Corporation Service Company 40 Technology Parkway South Norcross GA 30092</p>		<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery 5-19-05</p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2:05 cr 449 (Comp + summons 20 days)</p>		<p>7004 2510 0003 6669 8317</p>	
<p>PS Form 3811, February 2004</p>		<p>Domestic Return Receipt</p>	
		<p>102595-02-M-15 9</p>	